| PATENT APPLICATION FEE DETERMINATION RECOR | | | | | | | | | Application or Docket Number | | | | | |
|---|--|-----------------------------------|-------------------|----------------------|------------------------------|------------------|------------|-------------------|------------------------------|---------------------|-----------|---------------------|------------------------|--|
| | | | | | | | | | BA (830) | | | | | |
| Effective October 1, 2000 | | | | | | | | | | 976830 | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OR | OTHER SMALL | | |
| TOTAL CLAIMS | | | 36 | | | | | RATE | | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE 355.00 | | OR | BASIC FEE | 710.00 | | |
| TOTAL CHARGEABLE CLAIMS | | | 3 6 minus 20= | | . 16 | | | x\$ 9= 144 | | 44 | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = | | . 0 | | | X40= | | | OR | X80= | | |
| MU | LTIPLE DEPEN | DENT CLAIM P | RESENT | | | | | +135= | | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTA | -{- | 99 | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | L/L | | , | OTHER | THAN | |
| | | (Column 1) | | (Column 2) (Column 3 | | | | SMALL ENTITY | | | OR . | SMALL | ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST IBER OUSLY FOR | PRESENT EXTRA | · | RATE | E TI | DDI- ONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 36 | Minus | •• | 36 | = | | X\$ 9= | = | | OR | X\$18= | | |
| | Independent | · 3 | Minus | *** | 3 | = 535- | | X40= | | | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | | OR | +270= | | |
| | | | | | | | | | AL | | | TOTAL | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | ADDIT. F | EE | | | ADDIT. FEE | | |
| | | CLAIMS | | HIG | HEST | T | וו | | TA | DDI- | 1 | | ADDI- | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | PREV | MBER IOUSLY FOR | PRESENT EXTRA | | RATE | : TI | ONAL FEE | | RATE | TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | - | | OR | X\$18= | | |
| | Independent | • | Minus | *** | | <u> -</u> | | X40= | | | OR | X80= | | |
| ┞ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135: | - | | OR | +270= | | |
| | TOTAL | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| | |) | AUUII. I | | | | ADDIT. TEE | | | | | | | |
| l _o | | (Column 1) CLAIMS REMAINING | | HIG | imn 2) HEST MBER | PRESENT | 7 | | Α | DDI- | | | ADDI- | |
| AMENDMENT C | | AFTER AMENDMENT | | PREV | IOUSLY FOR | EXTRA | | RATE | | ONAL FEE | | RATE | TIONAL FEE | |
| N N | Total | | Minus | ** | | = | | X\$ 9= | - | | OR | X\$18= | | |
| ME | Independent | <u>l·</u> | Minus | *** | | = | | X40= | | | OR | X80= | | |
| L | FIRST PRESE | NTATION OF N | ULTIPLE DE | PENDEN | IT CLAIN | | _ | 405 | 十 | | | - | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | OR | +270= | <u> </u> | |
| "If the entry in column 1 is less than the entry in column 2, write "U in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| | The Highest Nur | nber Previously Pa | aid For" (Total o | r Indepen | dent) is th | e highest numb | er fo | und in the | approp | priate bo | x in co | lumn 1. | | |

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